

NH Public Utilities Commission

REC Aggregator Portal

New Users [CLICK HERE](#) to setup your account for this form. Creating an account enables you to partially complete the form and return later to finish it or to make changes after the form is submitted. Be sure to create your account **BEFORE** entering information into the form, or the information will be lost.

Existing Users [CLICK HERE](#)

Basic Information

Who is submitting this request?

Aggregator Batch Number

Are you registered in NH

- ☒ Yes
☐ No

Aggregator name

NH Reg #

Aggregator Email

Other Aggregator name

Other aggregator email address

Facility Name

Facility Owner Name

Facility Owner email

jan.leclerc@gmail.com

Owner Phone

603-756-3696

Facility Address

698 County Road

Facility Town/City

Walpole

Facility State

NH

Facility Zip

03608

Is the facility address the same as the owner's mailing address

☐ Yes

☒ No

Mailing Address

12 Galloway Lane

Mailing Town/City

Walpole

Mailing State

NH

Mailing Zip

03608

Primary Contact

Karen Tenneson

Primary Contact

Facility Primary Contact

karenton@knollwoodenergy.com

Other Email Address

Facility Information

Class

Utility

Other Utility Name

To obtain a GIS ID contact:

James Webb

408 517 2174

jwebb@apx.com

GIS ID (include "NON")

Date of Initial Operation

Facility Operator Name, if applicable

Panel Make #1

Panel Model

Panel Quantity

Panel Rated Output

More Panel types?

- ☒ No
☐ Yes

Panel Make #2

Panel Model

Panel Quantity

Panel Rated Output

More Panel types?

- ☒ No
☐ Yes

Panel Make #3

Panel Model

Panel Quantity

Panel Rated Output

System capacity based on panels

Inverter Quantity

Inverter Make

Add'l Inverter Quantity

Additional Inverter Make

Rated Output - Primary Inverter

11000

Rated Output - Additional Inverter

System capacity based on single inverter make

System capacity based on two inverter types

33000

System capacity in kW as stated on the interconnection agreement

25.0

Revenue Grade Meter Make

GE

Was this facility installed directly by the customer (no electrician involved)?

- ☐ Yes
☒ No

Electrician Name & Number

E.E. Houghton 0241C

Other Electrician Name & Number

Installation Company

Solar Dave LLC

Other Installation Company Name

Other Inst. Company Address

Other Inst. Company City

Other Inst. Company State

Other Inst. Company Zip

Independent Monitor Name & Company

Paul Button - Energy Audits Unlimited

Other Monitor Name and Company

Is the installer also the equipment supplier?

- ☒ Yes
☐ No

Equipment Vendor

Please attach your completed interconnection agreement including Exhibit B.

https://fs30.formsite.com/jan1947/files/f-5-99-6813103_GiEtRNkQ_Galloway_COC.pdf

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor or a designated representative.

A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Please attach additional document here

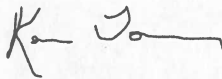
https://fs30.formsite.com/jan1947/files/f-5-168-6813103_pbRs7OEU_JoAn_Galloway_contract_part_3

Please attach additional document here

https://fs30.formsite.com/jan1947/files/f-5-173-6813103_QcrAZgwI_SignedSIA696CountyRevised_-_G

Aggregator statement of accuracy

Sign your name using a mouse or, if you are using a touch-screen device, a stylus or other pointer.

A handwritten signature in black ink, appearing to read "Karen Tonnesen", is written inside a rectangular box.

Print Name

Karen Tonnesen

Date Signed

05/18/2016

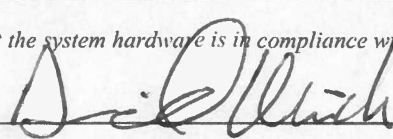
Exhibit B - Certificate of Completion for Simplified Process Interconnections

Installation Information:

☐ Check if owner-installed

Customer or Company Name (print): <u>John Galloway</u>		Contact Person, if Company: <u>Far Hills Farm</u>	
Mailing Address: <u>12 Galloway Lane</u>			
City: <u>Walpole</u>	State: <u>NH</u>	Zip Code: <u>03608</u>	E-Mail Address: <u>Jan.leclerc@gmail.com</u>
Telephone (Daytime): <u>603-756-3696</u>	(Evening):	Facsimile Number:	
Address of Facility (if different from above): <u>698 County Rd</u>			
City: <u>Walpole</u>	State: <u>NH</u>	Zip Code: <u>03608</u>	
Generation Vendor: <u>Solar Dave LLC</u>		Contact Person: <u>David Wirth</u>	

I hereby certify that the system hardware is in compliance with Puc 900.

Vendor Signature:  Date: 5/2/2016

Electrical Contractor's Name (if appropriate): <u>E.E. Houghton Co Inc</u>		License number: <u>NH 0241C</u>	
Mailing Address: <u>PO Box 387</u>			
City: <u>Walpole</u>	State: <u>NH</u>	Zip Code: <u>03608</u>	E-Mail Address: <u>info@eehoughton.com</u>
Telephone (Daytime): <u>603 756 3372</u>	(Evening): <u>603 756 3372</u>	Facsimile Number: <u>603 756 9998</u>	

Date of approval to install Facility granted by the Company: 11/19/2015 Installation Date: 5/2/2016
Application ID number: 2015-80

Inspection:

The system has been installed and inspected in compliance with the local Building/Electrical Code of

Walpole, Cheshire
(City/County)

Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection): 

Name (printed): Steve Grenier Date: 5/2/16

Dated: July 03, 2012
Effective: July 03, 2012

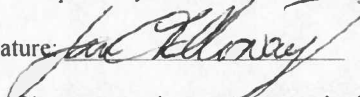
Issued by: /s/ Victor D. Del Vecchio
Victor D. Del Vecchio
Title: President

N.H.P.U.C. No. 18 - ELECTRICITY
LIBERTY UTILITIES

Original Pa;
Interconnection Standards Prc

Customer Certification:

I hereby certify that, to the best of my knowledge, all the information contained in this Interconnection Notice is true and correct. This system has been installed and shall be operated in compliance with applicable electrical standards. Also, the initial startup test required by Puc 905.04 has been successfully completed.

Customer Signature:  Date: 5-2-16

As a condition of interconnection you are required to send/email a copy of this form to:

Electric Sales and Marketing
Liberty Utilities
9 Lowell Road
Salem, NH 03079
NHSalesMarketing@LibertyUtilities.com

Issued by: /s/ Victor D. Del Vecchio
Victor D. Del Vecchio
Title: President

25,370, Dated 05/30/2012

New Hampshire PUC REC Certification Application Owner Statements

The information provided on this application for New Hampshire Renewable Energy Certificate eligibility is accurate to the best of my knowledge and I authorize Knollwood Energy to act on my behalf in filing said application.

The project described in this application will meet the metering requirements of PUC 2506 including:

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A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

JoAn Galloway

Printed Name of signature owner

JoAn Galloway
JoAn Galloway (May 9, 2016)

Signature of system owner

Simplified Process Interconnection Application and Service Agreement

Contact Information:Date Prepared: 6/22/15

Legal Name and Address of Interconnecting Customer (or, Company name, if appropriate):

Customer or Company Name (print): Joan Galloway Contact Person, if Company:Mailing Address: 12 Galloway LaneCity: Walpole State: NH Zip Code: 03608 E-Mail: N/ATelephone (Daytime): (603) 756-3696 (Evening): 603-756-3696 Facsimile Number: N/A**Alternative Contact Information** (e.g., system installation contractor or coordinating company, if appropriate):Name: David WirthMailing Address: 411 Spotted RoadCity: Westmoreland State: NH Zip Code: 03467 E-Mail: sdavidw@comcast.netTelephone (Daytime): 603-313-8671 (Evening): _____ Facsimile Number: _____**Electrical Contractor Contact Information** (if appropriate):Name: EE Houghton Co IncTelephone: 603-756-3371Mailing Address: P.O. Box 387City: Walpole State: NH Zip Code: 03608**Facility Information:**Address of Facility: 698 County Rd1- SB 4000 TL inverterCity: Walpole State: NH Zip Code: 03608Electric Supply Co: Liberty Acct #: 44638307-44306620 Meter #: E-98622622Gen/Inverter Manu: SMI Model Name and #: SB 7000 TL Quantity: 3Nameplate Rating: 25 (kW) _____ (kVA) 240 (AC Volts) Single ☒ or Three _____

Phase

System Design Capacity: 25 (kW) _____ (kVA)Battery Backup: Yes: _____ No: ☒Net Metering: If Renewably Fueled, will the account be Net Metered? Yes: ☒ No: _____Prime Mover: Photovoltaic ☒ Recip'g Engine ☐ Fuel Cell ☐ Turbine ☐ Other: _____Energy Source: Solar ☒ Wind ☐ Hydro ☐ Diesel ☐ Nat Gas ☐ Fuel Oil ☐ Other: _____UL 1741.1 (IEEE 1547.1) Listed? Yes: ☒ No: _____ External Manual Disconnect: Yes: ☒ No: _____Estimated Install Date: 3/15/2015 Estimated In-Service Date: 3/29/2015**Interconnecting Customer Signature**

I hereby certify that, to the best of my knowledge, all of the information provided in this application is true and I agree to the Terms and Conditions on the following page:

Customer Signature: Joan P GallowayTitle: ownerDate: 6-24-15

Please attach any documentation provided by the inverter manufacturer describing the inverter's UL 1741 listing.

Approval to Install Facility (For Company use only): Installation of the Facility is approved contingent upon the terms and conditions of this Agreement, and agreement to any system modifications, if required.Are system modifications required? Yes: _____ No: ☒ To be Determined _____Company Signature: JOAN Title: ENGINEERINGDate: 11/16/15Company waives inspection/Witness Test? Yes: ☒ No: _____Application Number 2015-804 inverters total.
3 - 7000, 1 - 4000

Dated: May 4, 2015

Effective: July 15, 2014

Issued by /s/ Richard Leehr

Richard Leehr

Title: President